

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/760019

FILING DATE

APPLICANTS

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND						
TOTAL DEP						
TOTAL CLAIMS						

	★		★		★	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND						
TOTAL DEP						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS